



**CERTIFICATE OF MAILING**

**PATENT**  
Docket: 2920(203-3753)

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450 Alexandria, Virginia 22313-1450 on April 2, 2004.

By: Michael J. Porco Date: April 2, 2004

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANT : Robert Wham et al.  
TITLE : AUTOMATIC CONTROL SYSTEM FOR  
AN ELECTROSURGICAL GENERATOR  
SERIAL NO. : 10/719,305  
FILED : November 21, 2003  
EXAMINER : TBD  
GROUP : ART UNIT 3762

**PRELIMINARY AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
MAILSTOP: NON-Fee Amendment

Dear Sir:

Preliminary to examination on the merits, please amend the above-identified application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

**Remarks** begin on page 3 of this paper.



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For: AUTOMATIC CONTROL SYSTEM FOR  
AN ELECTROSURGICAL GENERATOR

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
Mail Stop: Non-Fee Amendment

**AMENDMENT TRANSMITTAL FORM**

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. RATE FEE	ADDIT. RATE FEE
TOTAL	7*	MINUS 20**	=	X 9 \$	X 18 \$ 0
INDEP.	1*	MINUS 3**	=	X 43 \$	X 86 \$ 0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				X 140 \$	X 280 \$ 0
				TOTAL ADDIT. FEE	OR TOTAL \$ 0 \$ -0-

\* If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

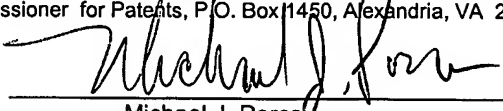
\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest No. Previously Paid For (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

**CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)**

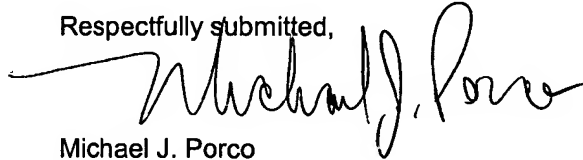
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Dated: April 2, 2004

  
Michael J. Porco

- ☐ Please charge Deposit Account No. 50-2140 in the amount of \$\_\_\_\_. Two (2) copies of this sheet are enclosed.
- ☐ A check in the amount of \$\_\_\_\_ is enclosed.
- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-2140. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-2140 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



Michael J. Porco  
Reg. No. 46,007  
Attorney for Applicant(s)

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MJP/gm